Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ire identification (for nple, your driver's	Deanna First name  Jean	First name
	licer	se or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Ternes  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ober or federal vidual Taxpayer utification number	xxx-xx-0775	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)		
	doing business as names	245555	2306506(e)		
		EINs	EINs		
5.	Where you live	13107 SE Gladstone Ct.	If Debtor 2 lives at a different address:		
		Portland, OR 97236	N. J. 2: 4 2: 4 2: 5 2: 5 2: 5 2: 5 2: 5 2: 5		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Multnomah County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Deb	otor 1	Deanna Jean Tern	es			Case number (if known)	
Par	t 2: To	ell the Court About Y	our Bankruptcy	Case			
7.	Bankr	napter of the uptcy Code you are ing to file under			of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bar box.	nkruptcy
8.	How y	ou will pay the fee	about how order. If y a pre-prin  I need to The Filing  I request	y you may pay. Typ our attorney is subn ted address. pay the fee in inst y Fee in Installments that my fee be wa	ically, if you are paying the fee yo nitting your payment on your behat allments. If you choose this options (Official Form 103A).  ived (You may request this option	with the clerk's office in your local court for murself, you may pay with cash, cashier's check llf, your attorney may pay with a credit card or n, sign and attach the <i>Application for Individua</i> only if you are filing for Chapter 7. By law, a just the contract of the c	check with check with als to Pay udge may,
			applies to	your family size an	d you are unable to pay the fee in	ur income is less than 150% of the official pove installments). If you choose this option, you mall Form 103B) and file it with your petition.	
9.		ou filed for optoy within the	■ No.				
	last 8		☐ Yes.				
			Distr	ict	When	Case number	
			Distr	ict	When	Case number	
			Distr	ict	When	Case number	
10.	Are an	y bankruptcy pending or being	■ No				
	filed b not fili you, o	y a spouse who is ng this case with r by a business r, or by an	☐ Yes.				
			Debt	or		Relationship to you	
			Distr	ict	When	Case number, if known	
			Debt	or		Relationship to you	
			Distr	ict	When	Case number, if known	
11.		u rent your	□ No. Go	to line 12.			
	reside	nce?	■ Yes. Has	s your landlord obta	ined an eviction judgment against	you and do you want to stay in your residence	e?
				No. Go to line	2.		
				Yes. Fill out <i>Ini</i> bankruptcy pet		ludgment Against You (Form 101A) and file it v	with this

Deb	otor 1 Deanna Jean Tern	es			Case number (if known)
_	D (A) (A D		v •		
Par	Report About Any Bu	sinesses	You Own as a	Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part	4.	
		☐ Yes.	Name and	location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of b	usiness, if any	
	If you have more than one sole proprietorship, use a		Number, S	treet, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Check the	appropriate bo	ox to describe your business:
	·				ness (as defined in 11 U.S.C. § 101(27A))
			☐ Sir	gle Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Sto	ckbroker (as d	lefined in 11 U.S.C. § 101(53A))
			☐ Co	mmodity Broke	er (as defined in 11 U.S.C. § 101(6))
			☐ No	ne of the above	e
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business of deadlines. If you indicate that you are a small business debtor, you must attach your most operations, cash-flow statement, and federal income tax return or if any of these document in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of	
de	For a definition of small	■ No.	I am not fil	ng under Char	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing	under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	, Hazardous P	roperty or An	y Property That Needs Immediate Attention
	Do you own or have any				,
14.	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is the h	azard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate needed, why		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the	property?	
					Number, Street, City, State & Zip Code

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	Deanna Jean Tern	es			ibei (ii kilowii)
Part	6: Answer These Questi	ons for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.	individual primarily for a per		efined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		### debts? Business debts are debts that you incurred to obtain or through the operation of the business or investment.  #### are not consumer debts or business debts  ### line 18.  ##
			■ Yes. Go to line 17.	rimarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an for a personal, family, or household purpose."  (6b. 17. Immarily business debts? Business debts are debts that you incurred to obtain sess or investment or through the operation of the business or investment.  (6c. 17. ebts you owe that are not consumer debts or business debts er Chapter 7. Go to line 18.  (a) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (b) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (c) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (c) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (c) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (c) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (c) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (d) the property is excluded and administrative expenses is will be available to distribute to unsecured creditors?  (d) the property is excluded and administrative expenses is will be available of the property is excluded and administrative expenses is will be available of the property is excluded and administrative expenses is will be available of the property is excluded and administrative expenses is will be available of the property is excluded and administrative expenses is will be available of the property is excluded and administrative expenses in the property is excluded and administrative expenses is the property is excluded and administrative expenses in the property is excluded and administrative expenses in the property is excluded and administrative expenses in the property is excluded and administra	
		16b.			
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busir	ness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
Do you estimate that after any exempt property is excluded and		■ Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that after any exempt provailable to distribute to unsecured creditor	roperty is excluded and administrative expenses ors?
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	Freditors do		□ 25.001-50.000	
	you estimate that you owe?			<b>5001-10,000</b>	
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000
19.	How much do you	<b>■</b> \$0 - \$:	50,000	☐ \$1,000,001 - \$10 million	
	estimate your assets to be worth?		01 - \$100,000		
			001 - \$500,000 001 - \$1 million		
20.	How much do you	□ \$0 - \$9	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000		
			001 - \$500,000 001 - \$1 million	_ : : : : : : : : : : : : : : : : : : :	_ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
Part	7: Sign Below				
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the inf	ormation provided is true and correct.
		I request	relief in accordance with the	chapter of title 11, United States Code, s	pecified in this petition.
		bankrupto and 3571	cy case can result in fines up		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Deanna	Ina Jean Ternes Jean Ternes of Debtor 1	Signature of Det	otor 2
		Executed	on <b>May 12, 2017</b>	Executed on	
			MM / DD / YYYY		/M / DD / YYYY

Debtor 1 Deanna Jean Teri	nes	Cas	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify t	ed States Code, and have e that I have delivered to the c	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	/ledge after an inquiry that the information in the
	/s/ Brian Wheeler Signature of Attorney for Debtor	Date	May 12, 2017 MM / DD / YYYY
	Brian Wheeler Printed name		
	Brian Wheeler Firm name		
	3939 NE Hancock Street Suite 304		
	Portland, OR 97212  Number, Street, City, State & ZIP Code		

Email address

Contact phone 503 284 0994

92195 Bar number & State brian@brian-wheeler.com

# **United States Bankruptcy Court District of Oregon**

In re	Deanna Jean Ternes	_	Case No	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS	SATION OF ATTOR	RNEY FOR D	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to accept			1,212.00
	Prior to the filing of this statement I have received		\$	1,212.00
	Balance Due			0.00
2. \$	<b>0.00</b> of the filing fee has been paid.			
3. Т	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
I. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. <b>I</b>	I have not agreed to share the above-disclosed compen	sation with any other person	unless they are me	mbers and associates of my law firm.
[	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5. I	n return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspects	s of the bankruptcy	case, including:
b c	<ul> <li>Analysis of the debtor's financial situation, and rendering</li> <li>Preparation and filing of any petition, schedules, statem</li> <li>Representation of the debtor at the meeting of creditors</li> <li>[Other provisions as needed]</li> </ul>	nent of affairs and plan which	may be required;	
7. B	By agreement with the debtor(s), the above-disclosed fee dependent any other adversary proceeding or contest preparing documents to add creditors, ap	hargeability actions, judic ted matters, appearance	cial lien avoidan at any discharç	ge or reaffirmation hearing,
		CERTIFICATION		
	certify that the foregoing is a complete statement of any anarchytey proceeding.	agreement or arrangement for	payment to me for	representation of the debtor(s) in
Ma	ay 12, 2017	/s/ Brian Wheeler		
Do	•	Brian Wheeler 92		
		Signature of Attorne Brian Wheeler	y	
		3939 NE Hancock	Street	
		Suite 304		
		Portland, OR 972		
		503 284 0994 Fax brian@brian-whe		
		Name of law firm		
		J J.		

# UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	DISTRICT (	OF OREGON		
In re Deanna Jean Ternes	) Case ! ) ) CHAI	NoPTER 7 INDIVIDUAL DEBT	OR'S*	
Debtor(s)		EMENT OF INTENTION(S) 1 U.S.C. §521(a)		
.,	) IEKI	1 0.5.C. §521(a)		
IMPORTANT NOTICES TO DEBTOR(S):  1. Complete, sign and file this form even if you have recreditors are listed, make sure the certificate of services.	e is completed.			
2. Failure to perform the intentions as to property state		•	· ·	<b>Y</b>
under 11 USC §341(a) may result in relief for the cre	ditor from the Autom	atic Stay protecting such prop	erty.	
PART A - Debts secured by property of the estate. (additional pages is necessary.)	Part A must be fully o	completed for <b>each</b> debt which	n is secured by property	of the estate. Attach
☐ IF NONE - Check this box.				
Property No. 1				
Creditor's Name: Capital One Auto Finance		Describe Property Sec 2014 Toyota Corolla		
Property will be (check one): ☐ SURRENDERED	■ RETAINED			
If retaining the property, I intend to (check at least o  ☐ Redeem the property  ☐ Reaffirm the debt  ☐ Other. Explain (for example, avoid lien using 11)				
Property is (check one): CLAIMED AS EXEMIPART B - Personal property subject to unexpired leading if necessary.)			d for each unexpired lea	se. Attach additional
■ IF NONE - Check this box.				
Property No. 1				
Lessor's Name:	Describe Leased P	roperty:	Lease will be assume §365(p)(2)  ☐ YES	ed pursuant to 11 USC  ☐ NO
Continuation sheets attached (if any).	1		-	
I DECLARE UNDER PENALTY OF PERJURY THAT INDICATES INTENTION AS TO ANY PROPERTY (SECURING A DEBT AND/OR PERSONAL PROPER AN UNEXPIRED LEASE.	OF MY ESTATE	I/WE, THE UNDERSIGNATE DOCUMENT AND LOCAL CREDITOR NAMED ABOUT A SHORT OF THE PROPERTY OF THE	L FORM #715 WERE SE	
DATE: May 12, 2017		DATE: <b>May 12, 2017</b>		
/s/ Deanna Jean Ternes		/s/ Brian Wheeler		92195
DEBTOR'S SIGNATURE		DEBTOR OR ATTORNEY	'S SIGNATURE	OSB# (if attorney)
JOINT DEBTOR'S SIGNATURE (If applicable)		JOINT DEBTOR'S SIGNA	ΓURE (If applicable and n	o attorney)
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Brian Wheeler 92195	503 284 0994	
		PRINT OR TYPE SIGNER		
		3939 NE Hancock Str Suite 304 Portland, OR 97212	eet	
		SIGNER'S ADDRESS (if at	rtorney)	

521.05 (12/1/16) **Page 1** 

#### NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

#### OUESTIONS????

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

Fill	in this infor	rmation to identify your	case:			
	otor 1	Deanna Jean Ter				
Date	t 0	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States B	ankruptcy Court for the:	DISTRICT OF OREGON	1		
Cas	e number own)				☐ Chec	κ if this is an
					amen	ded filing
		orm 106Sum				
				d Certain Statistical Information		12/15
infor	mation. Fill	l out all of your schedul	es first; then complete the	are filing together, both are equally responsible e information on this form. If you are filing amen the box at the top of this page.		
Part	1: Sumr	marize Your Assets				
					Your a	ssets of what you own
1.	Schedule . 1a. Copy li	A/B: Property (Official F ne 55, Total real estate, f	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy li	ne 62, Total personal pro	perty, from Schedule A/B		\$	33,274.02
	1c. Copy lin	ne 63, Total of all propert	y on Schedule A/B		\$	33,274.02
Part	2: Sumr	marize Your Liabilities				
					Your li	abilities
					Amour	t you owe
2.			claims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	12,697.00
3.	Schedule E 3a. Copy t	E/F: Creditors Who Have the total claims from Part	Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy t	the total claims from Part	2 (nonpriority unsecured cla	aims) from line 6j of Schedule E/F	\$	112,862.00
				Your total liabilities	s \$	125,559.00
Part	3: Sumr	marize Your Income and	d Expenses			
4.		: Your Income (Official Fo		<i>I</i>	\$	2,707.00
5.		J: Your Expenses (Officia monthly expenses from I			\$	2,521.00
Part	4: Answ	ver These Questions for	· Administrative and Statis	stical Records		
6.	•		er Chapters 7, 11, or 13? t on this part of the form. Ch	neck this box and submit this form to the court with y	our other sc	hedules.
_	■ Yes		,	,		
7.		of debt do you have?				
				lebts are those "incurred by an individual primarily fo g for statistical purposes. 28 U.S.C. § 159.	r a personal	, family, or
		debts are not primarily ourt with your other sched		re nothing to report on this part of the form. Check th	is box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,689.87

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	82,822.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	82,822.00

Fill in	this info	ormation to identify your	case and this filing:			
Debto	r 1	Deanna Jean Tei				
Debto	r 2	First Name	Middle Name	Last Name		
	e, if filing)	First Name	Middle Name	Last Name		
United	d States I	Bankruptcy Court for the:	DISTRICT OF OREGON			
_						
Case	number					☐ Check if this is an amended filing
						-
∩ffi	cial F	orm 106A/B				
			ortv			4044
		ıle A/B: Prop		If an accet fite in more than a		12/15
think it	fits best.	Be as complete and accura	pe items. List an asset only once ate as possible. If two married p	eople are filing together, both a	are equally responsible fo	r supplying correct
	ation. If m r every qu		a separate sheet to this form. C	In the top of any additional pag	es, write your name and o	case number (if known).
Part 1:	Describ	be Each Residence, Buildin	g, Land, or Other Real Estate Yo	u Own or Have an Interest In		
4 Davi						
1. роу	ou own o	or nave any legal or equitable	e interest in any residence, build	aing, iand, or similar property?		
■ N	lo. Go to F	Part 2.				
ΠY	es. Wher	e is the property?				
Part 2:	Describ	be Your Vehicles				
Da	1.		uitable interest in annuabiel	h -4h 4h		
			uitable interest in any vehiclele, also report it on Schedule of			y venicies you own that
3. Car	s. vans.	trucks, tractors, sport u	tility vehicles, motorcycles			
		, шилого, орогг ш	,			
■ Y	'es					
3.1	Make:	Toyota	Who has an interest	in the property? Check one		d claims or exemptions. Put
0	Model:	Corolla	Debtor 1 only	and property i dillock one		cured claims on Schedule D: Claims Secured by Property.
	Year:	2014	Debtor 2 only		Current value of the	Current value of the
			Debtor 1 and Debt	•	entire property?	portion you own?
1	Other into	ormation:	At least one of the	debtors and another		
			☐ Check if this is co	ommunity property	\$12,500.0	\$12,500.00
			(see instructions)			
			ATVs and other recreational vonal watercraft, fishing vessels			
_			•	•		
□ Y	es					
					_	
			you own for all of your entri			\$12,500.00
.pag	ges you	have attached for Part 2	. Write that number here		=>	Ψ12,300.00
Part 3:	Describ	be Your Personal and Hous	ehold Items			
			able interest in any of the fo	llowing items?		Current value of the
						portion you own? Do not deduct secured
0 11-	laak sid	and and from the				claims or exemptions.
		goods and furnishings Major appliances, furniture	e, linens, china, kitchenware			
Official	Form 10	06A/B	Schedule	A/B: Property		page 1

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Debtor	r 1	Deanna Jea	n Ternes Case num	ber (if known)
	Yes. [	Describe		
			Misc Furniture	\$500.00
			Misc Household goods	\$100.00
7. Elec			and radios; audio, video, stereo, and digital equipment; computers, printers, scan	nare: music collections: electronic devices
			Il phones, cameras, media players, games	mers, music conections, electronic devices
		D "h -		
<b>—</b> )	res. L	Describe		
			TV	\$150.00
			Computer	\$600.00
			Cell Phone	\$100.00
		les of value		ata an and a sala and a language and
EX	ampie		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects ions, memorabilia, collectibles	; stamp, coin, or baseball card collections;
	No			
	Yes. [	Describe		
		nt for sports a		
Exa	ample	s: Sports, phot musical inst	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, ruments	skis; canoes and kayaks; carpentry tools;
	No			
	Yes. [	Describe		
10. <b>Fir</b>	earm	s		
_		es: Pistols, rifle	s, shotguns, ammunition, and related equipment	
■ N		Describe		
11. <b>Cl</b> o			lothes, furs, leather coats, designer wear, shoes, accessories	
<b>-</b> \	Yes. [	Describe		
			Clothing and shoes	\$400.00
			-	
			Misc Accessories	\$100.00
			111133 71333331133	
12. <b>Je</b> v	welrv			
Ex	xampl		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, wat	ches, gems, gold, silver
□ N		Describe		
<b>—</b> 1	res. L	Describe		
			Misc Costume jewelry	\$50.00
-		m animals	hirda harasa	
E)		es: Dogs, cats,	DILUS, HUISES	
		Describe		

Debt	or 1 Deanna Jean 7	Ternes	Case number (if known)	
14. <b>A</b>	ny other personal and	household items you did ı	not already list, including any health aids you did not list	
	No			
	Yes. Give specific inform	mation		
15	Add the deller velve of	all of varie antico from D	nut 2 including any entries for page you have attached	
			art 3, including any entries for pages you have attached	\$2,000.00
	Describe Your Financia			
Do y	ou own or have any leg	al or equitable interest in	any of the following?	Current value of the portion you own?
				Do not deduct secured
				claims or exemptions.
16. <b>C</b>		ve in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petiti	on
	No	ve iii year wanet, iii year ne		
	Yes			
			Cash	\$28.00
17. D	eposits of money			
I	,	0 1	unts; certificates of deposit; shares in credit unions, brokerage I with the same institution, list each.	nouses, and other similar
	No	you have maniple accounts	wan the same methatish, not easil.	
	Yes		Institution name:	
		0	Ohana	<b>\$4,000,00</b>
		17.1. Checking	Chase	\$1,009.86
		17.2. Debit card acco	unt Simple	\$5.00
		publicly traded stocks	Large Constant and at a constant	
_	<i>Examples:</i> Bond funds, in No	ivestment accounts with bro	kerage firms, money market accounts	
	Yes	Institution or issuer r	name:	
10 N	on-nublicly traded stoc	ek and interests in incorno	prated and unincorporated businesses, including an interes	t in an LLC nartnership and
	oint venture	ok and interests in incorpo	rated and difficorporated businesses, including an interes	t iii aii EEO, partiiei siiip, aiid
	No			
	Yes. Give specific inform	mation about them Name of entity:	 % of ownership:	
00 0		•	·	
			tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	
	· ·	nts are those you cannot trai	nsfer to someone by signing or delivering them.	
	No Yes. Give specific inform	nation about them		
	res. Give specific inform	Issuer name:		
04 B	otiroment or nencion o	oo ounto		
	etirement or pension a Examples: Interests in IRA		03(b), thrift savings accounts, or other pension or profit-sharing	plans
	No			
	Yes. List each account s	•		
		Type of account:	Institution name:	
		Type of account:	Institution name:	
		Type of account: 401A	Oregon Health & Science University	\$10,961.47
				\$10,961.47 \$2,112.69

De	ebtor 1	Deanna J	ean Ternes		Case number (if kr	nown)	
						·	
	Your sh	nare of all uni	nd prepayments used deposits you have made s nts with landlords, prepaid rent		ervice or use from a company as, water), telecommunications co	ompanies, or o	thers
				Institution name or	· individual:		
	_	es (A contrad	ct for a periodic payment of mor	ney to you, either for life or	for a number of years)		
	■ No □ Yes		Issuer name and description.				
	26 U.S.C	<b>s in an educ</b> C. §§ 530(b)(	ation IRA, in an account in a (1), 529A(b), and 529(b)(1).	qualified ABLE program,	or under a qualified state tuition	n program.	
	■ No □ Yes		Institution name and description	on. Separately file the reco	rds of any interests.11 U.S.C. § 5	21(c):	
	Trusts, ∈	equitable or	future interests in property (	other than anything listed	d in line 1), and rights or power	's exercisable	for your benefit
	☐ Yes. (	Give specific	information about them				
26.			, trademarks, trade secrets, a domain names, websites, proce				
	☐ Yes.	Give specific	information about them				
27.	Exampl		s, and other general intangib permits, exclusive licenses, coo		ngs, liquor licenses, professional	licenses	
	■ No □ Yes. (	Give specific	information about them				
Mc	onev or r	property owe	ed to you?			Cu	rrent value of the
	лю <b>у</b> о. р	or openity our	a to you.			<b>po</b> i Do	rtion you own? not deduct secured ims or exemptions.
28.	Tax refu ■ No	unds owed t	o you				
	☐ Yes. 0	Give specific	information about them, includi	ng whether you already file	d the returns and the tax years		
29.	Family s	support					
	Example ■ No	les: Past due	or lump sum alimony, spousal	support, child support, mai	ntenance, divorce settlement, pro	perty settleme	ent
		Give specific	information				
30.		les: Unpaid w	neone owes you rages, disability insurance payr unpaid loans you made to som		ck pay, vacation pay, workers' co	ompensation, S	Social Security
	□ No		,				
	■ Yes.	Give specific	information				
			Estimated	I net wages and vacation	on pay owed as of 5/12/17		\$4,657.00
	Exampl	t <b>s in insuran</b> <i>les:</i> Health, d		th savings account (HSA); o	credit, homeowner's, or renter's ir	nsurance	
	■ No □ Yes. N	Name the ins	urance company of each policy Company name:	and list its value.	Beneficiary:	_	urrender or refund alue:
						VC	

Dei	Deanna Jean Ternes		Case number (if known)	
_	Any interest in property that is due you from someone who half you are the beneficiary of a living trust, expect proceeds from a someone has died.  No		are currently entitled to rece	eive property because
[	Yes. Give specific information			
į	Claims against third parties, whether or not you have filed a la Examples: Accidents, employment disputes, insurance claims, or No		and for payment	
L	Yes. Describe each claim			
ı	Other contingent and unliquidated claims of every nature, inc No Yes. Describe each claim	luding counterclaims o	of the debtor and rights to	set off claims
_	Any financial assets you did not already list I <sub>NO</sub>			
[	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includ for Part 4. Write that number here			\$18,774.02
Par	5: Describe Any Business-Related Property You Own or Have an International Control of the Contro	erest In. List any real esta	te in Part 1.	
37.	o you own or have any legal or equitable interest in any business-rela	ated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Par	6: Describe Any Farm- and Commercial Fishing-Related Property You fly you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	at In.	
46.	Oo you own or have any legal or equitable interest in any farm	n- or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Par	7: Describe All Property You Own or Have an Interest in That You	ou Did Not List Above		
53.	Oo you have other property of any kind you did not already lis	st?		
	Examples: Season tickets, country club membership			
	No Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Par	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$12,500.00		
57.	Part 3: Total personal and household items, line 15	\$2,000.00		
58.	Part 4: Total financial assets, line 36	\$18,774.02		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$33,274.02	Copy personal property to	stal <b>\$33,274.02</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$33,274.02

neck if this is an

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
2014 Toyota Corolla 49.000 miles	\$12,500.00		\$3,775.00	11 U.S.C. § 522(d)(2)				
Ellie Holli Genedale PAB. G.1			100% of fair market value, up to any applicable statutory limit					
Misc Furniture	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
Line IIIII Schedule PAB. 0.1			100% of fair market value, up to any applicable statutory limit					
Misc Household goods	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)				
Line IIIII Schedule PAB. 0.2			100% of fair market value, up to any applicable statutory limit					
TV	\$150.00		\$150.00	11 U.S.C. § 522(d)(5)				
Line IIIII Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit					
Computer	\$600.00		\$600.00	11 U.S.C. § 522(d)(5)				
LINE HOLL SCHEUUIE PVD. 1.2			100% of fair market value, up to any applicable statutory limit					
	For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property  2014 Toyota Corolla 49.000 miles Line from Schedule A/B: 3.1  Misc Furniture Line from Schedule A/B: 6.1  Misc Household goods Line from Schedule A/B: 6.2  TV Line from Schedule A/B: 7.1	For any property you list on Schedule A/B that you claim as executed as schedule A/B that lists this property and line on Schedule A/B that lists this property and line on Schedule A/B that lists this property and line on Current value of the portion you own Copy the value from Schedule A/B  2014 Toyota Corolla 49.000 miles Line from Schedule A/B: 3.1  Misc Furniture Line from Schedule A/B: 6.1  Misc Household goods Line from Schedule A/B: 6.2  TV Line from Schedule A/B: 7.1  \$150.00  Computer  \$600.00	For any property you list on Schedule A/B that you claim as exempt,  Brief description of the property and line on Schedule A/B that lists this property  Copy the value from Schedule A/B  2014 Toyota Corolla 49.000 miles Line from Schedule A/B: 3.1  Misc Furniture Line from Schedule A/B: 6.1  Misc Household goods Line from Schedule A/B: 6.2  TV Line from Schedule A/B: 7.1  Computer Line from Schedule A/B: 7.2	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  Brief description of the property and line on Schedule A/B that lists this property  Current value of the protein you own Copy the value from Schedule A/B: 3.1  Copy the value from Schedule A/B: 3.1  S12,500.00  S12,500.00  100% of fair market value, up to any applicable statutory limit  Misc Furniture Line from Schedule A/B: 6.1  Misc Household goods Line from Schedule A/B: 6.2  S100.00  S100.00  100% of fair market value, up to any applicable statutory limit  TV Line from Schedule A/B: 7.1  S150.00  TOWN of fair market value, up to any applicable statutory limit  Computer Line from Schedule A/B: 7.2  S600.00  100% of fair market value, up to any applicable statutory limit  100% of fair market value, up to any applicable statutory limit  S150.00  S150.00  S150.00  S150.00  S150.00  S150.00  S150.00  TOWN of fair market value, up to any applicable statutory limit  Nown of fair market value, up to any applicable statutory limit  Nown of fair market value, up to any applicable statutory limit  Nown of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Deanna Jean Ternes			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Cell Phone	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 7.3			100% of fair market value, up to any applicable statutory limit	
Clothing and shoes Line from Schedule A/B: 11.1	\$400.00	•	\$400.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Misc Accessories Line from Schedule A/B: 11.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Misc Costume jewelry Line from Schedule A/B: 12.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)
			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$28.00		\$28.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Line from Schedule A/B: 17.1	\$1,009.86		\$1,009.86	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Debit card account: Simple Line from Schedule A/B: 17.2	\$5.00	•	\$5.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
401A: Oregon Health & Science University	\$10,961.47		100%	11 U.S.C. § 522(d)(12)
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
403b: Oregon Health & Science University	\$2,112.69		100%	11 U.S.C. § 522(d)(12)
Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
	\$4,657.00		\$4,657.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
Estimated net wages and vacation pay owed as of 5/12/17 Line from Schedule A/B: 30.1  Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3  No Yes. Did you acquire the property covered No Yes	of more than \$160,37 3 years after that for ca	<b>5?</b> ises fil	\$4,657.00  100% of fair market value, up to any applicable statutory limit	nt.)

Official Form 106C

Fill in this informa	ation to identify yo	ur case:				
Debtor 1	Deanna Jean T	ernes				
202101	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the	DISTRICT OF OREGON				
Case number						
(if known)					_	if this is an ded filing
Official Form	106D					
		s Who Have Claim	s Secured	by Propert	у	12/15
		If two married people are filing tog out, number the entries, and attack				
•	ave claims secured b	y your property?				
☐ No. Check t	his box and submit	this form to the court with your ot	her schedules. You	u have nothing else t	o report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the	creditor separately	Column A	Column B	Column C
for each claim. If mor	re than one creditor ha	s a particular claim, list the other credical order according to the creditor's r	litors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Capital One	e Auto Finance	Describe the property that secur	res the claim:	\$12,697.00	\$12,500.00	\$197.00
Creditor's Name		2014 Toyota Corolla 49.00	00 miles			
POB 30285 Salt Lake C	City, UT 84130	As of the date you file, the claim apply.  Contingent	is: Check all that			
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that app	•			
Debtor 1 only		An agreement you made (such car loan)	as mortgage or secu	ired		
☐ Debtor 2 only ☐ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien,	mashanisla lian)			
_	e debtors and another	☐ Judgment lien from a lawsuit	mechanic's lien)			
☐ Check if this clai	m relates to a	Other (including a right to offset	t)			
	Opened					
Date debt was incur		Last 4 digits of account n	umber 6205			
Add the dollar value	ue of your entries in (	Column A on this page. Write that n	number here:	\$12,69	97.00	
If this is the last parties that number		I the dollar value totals from all pag	jes.	\$12,69	97.00	
Part 2: List Other	ers to Be Notified fo	or a Debt That You Already Lis	ted			
Use this page only i trying to collect from than one creditor fo	f you have others to I n you for a debt you	pe notified about your bankruptcy fowe to someone else, list the credit to you listed in Part 1, list the additi	for a debt that you a tor in Part 1, and the	en list the collection a	gency here. Similarly, if	you have more
	er, Street, City, State &	Zip Code	On which	n line in Part 1 did you e	nter the creditor? 2.1	
Capital On POB 6051	e Auto Finance 1		Last 4 die	gits of account number	6205	

City of Industry, CA 91716-0511

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in this	s information to identify your c	ase:					
Debtor 1	Deanna Jean Tern	es					
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name				
United Sta	ates Bankruptcy Court for the:	DISTRICT OF OREGO	N				
Case num	nber				☐ Check amend	if this is an ed filing	
	Form 106E/F ule E/F: Creditors Wi	no Have Unsec	ured Claims			12/15	
any execut Schedule G Schedule D left. Attach	plete and accurate as possible. Use ory contracts or unexpired leases t is: Executory Contracts and Unexpir is: Creditors Who Have Claims Secu the Continuation Page to this page case number (if known).	hat could result in a claim red Leases (Official Form red by Property. If more s	. Also list executory contract 106G). Do not include any cre pace is needed, copy the Part	s on Schedule A/B: P ditors with partially s you need, fill it out, r	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on re listed in the boxes on the	
Part 1:	List All of Your PRIORITY Uns	ecured Claims					
1. Do an	y creditors have priority unsecured	claims against you?					
□ No	. Go to Part 2.						
Ye:	S.						
identify possib	I of your priority unsecured claims. y what type of claim it is. If a claim has le, list the claims in alphabetical order If more than one creditor holds a par	both priority and nonpriority according to the creditor's i	/ amounts, list that claim here a name. If you have more than two	nd show both priority a	nd nonpriority amount	s. As much as	
(For ar	n explanation of each type of claim, se	e the instructions for this fo	rm in the instruction booklet.)	Total claim	Priority	Nonpriority	
				Total claim	amount	amount	
	nternal Revenue Service	Last 4 digits o	f account number	\$0.00	\$0.00	\$0.00	
	riority Creditor's Name	When was the	debt incurred?				
_	OB 7346 hiladelphia, PA 19101-7346	when was the	debt incurred?				
	umber Street City State Zlp Code	As of the date	you file, the claim is: Check a	II that apply			
Who	incurred the debt? Check one.	☐ Contingent					
■ <sub>D</sub>	ebtor 1 only	☐ Unliquidate	d				
□D	□ Debtor 2 only □ Disputed						
_	☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim:						
	t least one of the debtors and another	☐ Domestic s	upport obligations				
	heck if this claim is for a communi	<u> </u>	certain other debts you owe the	aovernment			
	e claim subject to offset?		leath or personal injury while yo				
■ N		☐ Other. Spec					
□ Y		- Other Oper	Precautionary notic	e			

Del	btor 1 Deanna Jean Ternes		Case number (if know)			
2.2	Oregon Department of Revenue	Last 4 digits of account number	\$0.00	\$0.00 \$0.00		
	Priority Creditor's Name			<u> </u>		
	Attention Bankruptcy Unit 955 Center St NE	When was the debt incurred?				
	Salem. OR 97301-2555					
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim				
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government			
	Is the claim subject to offset?	☐ Claims for death or personal injury				
	■ No	Other. Specify				
	Yes	Precautionar	y notice			
Pai	t 2: List All of Your NONPRIORITY Unsecu	red Claims				
3.	Do any creditors have nonpriority unsecured claim	s against you?				
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other sch	edules.			
	Yes.	,				
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what	type of claim it is. Do not list claims already in	ncluded in Part 1. If more		
				Total claim		
4.1	Advantis Credit Union	Last 4 digits of account number	0143	\$1,200.00		
	Nonpriority Creditor's Name	_				
	3010 SE Belmont Portland, OR 97223	When was the debt incurred?	Opened 11/23/16	_		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	a plane and ather similar date			
	■ No	Debts to pension or profit-sharin				
	☐ Yes	Other. Specify Holiday Lo	an	_		

Debto	Deanna Jean Ternes	Case number (if know)				
4.2	Advantis Credit Union	Last 4 digits of account number	4002	\$390.00		
	Nonpriority Creditor's Name 3010 SE Belmont St Portland, OR 97214	When was the debt incurred?		<del></del>		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	Yes	Other. Specify Overdraft of	on checking account			
4.3	AMEX	Last 4 digits of account number	1003	\$1,003.00		
	Nonpriority Creditor's Name POB 98154	When was the debt incurred?	Opened 11/15			
	EI Paso, TX 79998  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	,,,,,	and apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	•			
	Yes	Other. Specify Credit card	purchases			
4.4	Avant Credit, Inc	Last 4 digits of account number	8201	\$3,689.00		
	Nonpriority Creditor's Name 640 N La Salle St STE 535 Chicago, IL 60654	When was the debt incurred?	Opened 10/15			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	Yes	Other. Specify Loan				
		- Other. Opeony				

Debtor	1 Deanna Jean Ternes	Case number (if know)				
4.5	Capital One Bank	Last 4 digits of account number 3313	\$4,418.00			
	Nonpriority Creditor's Name POB 30285	When was the debt incurred? Opened 11/13				
	Salt Lake City, UT 84130  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit card purchases				
4.6	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,115.00			
	POB 30285 Salt Lake City, UT 84130	When was the debt incurred? Opened 05/12				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify Credit card purchases				
	100	Other: Specify				
4.7	Credit One Bank NA	Last 4 digits of account number 4784	\$372.00			
	Nonpriority Creditor's Name POB 98873	When was the debt incurred? Opened 08/16				
	Las Vegas, NV 89193  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	☐ Yes	■ Other. Specify Credit card purchases				

Debto	r 1 Deanna Jean Ternes	Case number (if know)				
4.8	Department of Education Navient Nonpriority Creditor's Name	Last 4 digits of account number 0322	\$82,822.00			
	POB 9635	When was the debt incurred? Opened 03/13				
	Wilkes Barre, PA 18773  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	☐ Other. Specify				
		Educational				
4.9	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number 4967	\$2,250.00			
	POB 3025 New Albany, OH 43054	When was the debt incurred? Opened 02/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Other. Specify Credit card purchases				
4.1	First Premier Bank	Last 4 digits of account number 8991	\$87.00			
	Nonpriority Creditor's Name 601 S Minneapolis Ave	When was the debt incurred? Opened 01/17				
	Sioux Falls, SD 57104	Opened 01/17				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit card purchases				

1 Deanna Jean Ternes		Case number (if know)			
Genesis Bankcard Services	Last 4 digits of account number	5880	\$372.00		
Nonpriority Creditor's Name 15220 NW Greenbrier Pkwy STE 200	When was the debt incurred?	Opened 12/16			
Beaverton, OR 97006					
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	_				
Debtor 1 only	Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt	Student loans				
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify Credit card	purchases			
HSBC	Last 4 digits of account number	4259	\$2,492.00		
Nonpriority Creditor's Name Hsbc Card Srvs Attn: Bankruptcy Po Box 5213	When was the debt incurred?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Carol Stream, IL 60197					
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify credit card				
Macy's	Last 4 digits of account number	3232	\$226.00		
Nonpriority Creditor's Name POB 8053	When was the debt incurred?	Opened 02/16	<u> </u>		
Mason, OH 45040  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
☐ Yes	■ Other Specify Charge Acc	count			

Schedule E/F: Creditors Who Have Unsecured Claims

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Deanna Jean Ternes		Case number (if know)			
Nordstrom Fsb	Last 4 digits of account number	0614	\$2,744.0		
Nonpriority Creditor's Name POB 6555	When was the debt incurred?	Opened 09/13			
Englewood, CO 80155	_				
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
_					
Debtor 1 only	Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.			
At least one of the debtors and another	Student loans	d Claim.			
☐ Check if this claim is for a community		restion correspond or diverse that you did not			
s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
☐Yes	■ Other. Specify Credit card	purchases			
		Mult			
OHSU Patient Accounts	Last 4 digits of account number	accounts	Unknowr		
Nonpriority Creditor's Name POB 3857	When was the debt incurred?	Opened 11/3/2016			
Portland, OR 97208  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	•				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing				
Yes	Other. Specify medical se	ervices			
Dregon Department of Revenue	Last 4 digits of account number	4192	\$316.00		
Nonpriority Creditor's Name 1955 Center St NE	When was the debt incurred?	Opened 4/20/2015			
Salem, OR 97301-2555 Number Street City State Zlp Code	As of the date you file, the claim i	in Charle all that anniv			
Who incurred the debt? Check one.	As of the date you file, the claim	<b>s.</b> Спеск ан так арргу			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	Unliquidated				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	■ Other. Specify Patient acc	ounts			

	Case number (if know)				
Oregon Department of Revenue	Last 4 digits of account number 8976	\$4,986.00			
Nonpriority Creditor's Name 955 Center St NE	When was the debt incurred?				
Salem, OR 97301-2555  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the diam is. Officer an that appry				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not				
•	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	Other. Specify Income tax				
Portland General Electric	Last 4 digits of account number 0112	\$159.00			
Nonpriority Creditor's Name		•			
121 S.W. Salmon St	When was the debt incurred?				
Portland, OR 97204	As of the date you file the claim is Observed all that such				
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
	-				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
At least one of the debtors and another	Student loans				
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	■ Other. Specify Utility Services				
Southwest Credit Systems	Last 4 digits of account number	\$165.00			
Nonpriority Creditor's Name 4120 International Parkway Ste 1100	When was the debt incurred?				
Carrollton, TX 75007					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other Specify Collection for Comcast				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 10

Debtor	Deanna Jean Ternes		Case number (if know)	
4.2	USAA Bank	Last 4 digits of account number	er 0963	\$4,056.00
	Nonpriority Creditor's Name 9800 Fredericksburg Rd	When was the debt incurred?	Opened 4/16/07	_
	San Antonio, TX 78288  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the clai	m is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	eparation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sha	aring plans, and other similar debts	
	□Yes	Other Specify Automob	ile	<u> </u>
Part 3:	List Others to Be Notified About a Del	bt That You Already Listed		
. Use tl is try have	his page only if you have others to be notified a ing to collect from you for a debt you owe to so more than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	about your bankruptcy, for a debt that omeone else, list the original creditor it you listed in Parts 1 or 2, list the ac	r in Parts 1 or 2, then list the collection agen	cy here. Similarly, if you
		On which entry in Part 1 or Part 2 did y		
AME)	( 650448	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured CI	
_	s, TX 75265		■ Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number	1003	
Avant	t Compliance Department	On which entry in Part 1 or Part 2 did y Line <b>4.4</b> of ( <i>Check one</i> ):	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Cl	aims
	l. LaSalle St, Ste. 1700 Igo, IL 60601		Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number		
		On which entry in Part 1 or Part 2 did y	•	
Bank POB 4		Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured CI	
	erton, OR 97076		■ Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number	5880	
	and Address	On which entry in Part 1 or Part 2 did y		
	al One Bank 60599	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured CI	
_	Of Industry, CA 91716		■ Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number	3313	
		On which entry in Part 1 or Part 2 did y		
Como	ast John F Kennedy Blvd	Line <b>4.19</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured CI	
	delphia, PA 19103		■ Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number	7903	
		On which entry in Part 1 or Part 2 did y	_	
Macy'	rs 9001094	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Cl	
_	ville, KY 40290-1094		Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number	3232	
		On which entry in Part 1 or Part 2 did y		
		Line <u>4.12</u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured CI	
	Justison Street ington, DE 19801		Part 2: Creditors with Nonpriority Unsecure	d Claims
• • • • • • • • • • • • • • • • • • • •		Last 4 digits of account number		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				 
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 82,822.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 30,040.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 112,862.00

Fill in this infor					
Debtor 1 Deanna Jean Ternes					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number					
(if known)					Check if this is an amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				<del>_</del>
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in this	information to identify you				
FIII III UNIS	s information to identify your	case:			
Debtor 1	Deanna Jean Tel	rnes Middle Name	Last Name		
Debtor 2	i iist ivaille	Middle Name	Last Name		
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF OREGO	N		
Case num	nber			☐ Check if this is amended filing	an
Officia	ll Form 106H				
	dule H: Your Cod	lebtors			12/15
1. Do	e and case number (if known you have any codebtors? (If	,		as a codebtor.	
■ No □ Ye					
	t <b>hin the last 8 years, have yo</b> na, California, Idaho, Louisiana			y? (Community property states and territories incluington, and Wisconsin.)	ıde
	. Go to line 3. s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the perso sure you have listed the creditor on Schedule D 6G). Use Schedule D, Schedule E/F, or Schedul	Official
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe to Check all schedules that apply:	he debt
3.1				☐ Schedule D, line	
0.1	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Ni mahar Cirani				
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

United Case (If know)  Offi Sch Be as a supply		Jean Ternes							
United Case (If know)  Offi Sch Be as supply	or 2								
Case (If know)  Offi Sch Be as a supply	e, if filing)				_				
Offi Sch Be as a supply	d States Bankruptcy Court fo	r the: DISTRICT OF OREG	ON						
Sch Be as s	number 		-			Check if this is:  An amende  A supplementation	d filing		chapter
Be as supply	icial Form 106I					MM / DD/ Y		ring date.	
Be as supply	hedule I: Your II	ncome				IVIIVI / DD/ T	111		12/15
	ying correct information. If ie. If you are separated and i a separate sheet to this fo	possible. If two married peo you are married and not filin your spouse is not filing wi rm. On the top of any addition	ng jointly, and your sith you, do not include	spouse i de infori	s living nation	ı with you, inclu about your spo	ude informati ouse. If more	on about space is r	your needed,
	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than one job, attach a separate page with information about additional	o, Employment status	■ Employed	■ Employed		☐ Emplo	☐ Employed		
ir		Employment status	☐ Not employed	☐ Not employed			mployed		
	employers.	Occupation	Research Assis	tant					
S	Include part-time, seasonal, c self-employed work.	Employer's name	Oregon Health & Science University						
	Occupation may include student or homemaker, if it applies.	ent Employer's address	3375 SW Terwill Portland, OR 97		vd				
		How long employed t	here? <u>1 year (</u>	6 month	ıs				
Part 2	Give Details About	Monthly Income							
spouse	e unless you are separated.	he date you file this form. If you make more than one employer, co	, ,		·			Í	Ü
	space, attach a separate shee			irioi aii c	проус	13 101 that perso		DCIOW. II y	ou riccu
					F	or Debtor 1	For Debtor non-filing		
		salary, and commissions (behly, calculate what the monthle		2.	\$	3,632.00	\$	N/A	
3. <b>E</b>	Estimate and list monthly o	vertime pay.		3.	+\$	0.00	+\$	N/A	
4. <b>C</b>	Calculate gross Income. Ad	dd line 2 + line 3.		4.	\$	3,632.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

11. State all other regular contributions to the expenses that you list in *Schedule J*.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.

Specify:

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Schedules* and *Statistical Summary of Certain Liabilities* and Related *Data*, if it applies

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No.	
Yes. Explain:	

Official Form 106I Schedule I: Your Income page 2

Fill	in this information	to identify yo	our case:					
Deb	otor 1 De	anna Jean	Ternes			Che	eck if this is:	
Deh	otor 2						An amended filing	wing postpetition chapter
	ouse, if filing)						13 expenses as of	
Unit	ed States Bankruptcy	Court for the:	DISTRI	CT OF OREGON			MM / DD / YYYY	
Cas	e number							
(If k	nown)							
O	fficial Form	106J						
	chedule J:		Exper	ises				12/15
Be info	as complete and	accurate as space is ne	possible eded, atta	. If two married people a ch another sheet to this				
Par 1.	t 1: Describe 'Is this a joint ca	Your House	hold					
1.	■ No. Go to line							
	☐ Yes. <b>Does De</b>		n a separ	ate household?				
	□ No							
	☐ Yes. □	Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.	
2.	Do you have de	pendents?	■ No					
	Do not list Debto Debtor 2.	r 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents nam	es.						☐ Yes ☐ No
								□ No □ Yes
								□ No
								☐ Yes
								□ No
2	De veur evnene	مهاییطم	_					☐ Yes
3.	Do your expens expenses of peo yourself and you	ople other ti	han <sub>—</sub>	No Yes				
Par				y Expenses				
exp				uptcy filing date unless y y is filed. If this is a sup				
the				government assistance is luded it on <i>Schedule I:</i>			Your exp	enses
,								
4.	The rental or ho payments and ar			ses for your residence. I r lot.	nclude first mortgage	e 4.	\$	800.00
	If not included i	n line 4:						
	4a. Real estate					4a.	·	0.00
		nomeowner's				4b.	<u> </u>	20.00
				ıpkeep expenses dominium dues		4c. 4d.	·	0.00
5.				our residence, such as ho	me equity loans	4u. 5.		0.00

ebtor 1	Deanna	Jean Ternes	Case num	nber (if known)	
. Util	lities:				
. Otili 6a.		, heat, natural gas	6a.	\$	140.00
6b.	,	ewer, garbage collection	6b.		50.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	
6d.	•			*	95.00
		·	6d.	·	0.00
		sekeeping supplies	7.	·	450.00
_		children's education costs	8.	·	0.00
	-	dry, and dry cleaning	9.	·	100.00
		products and services	10.	\$	50.00
. Med	dical and de	ental expenses	11.	\$	75.00
	•	Include gas, maintenance, bus or train fare. car payments.	12.	\$	250.00
		clubs, recreation, newspapers, magazines, and books	13.	· ·	150.00
		tributions and religious donations	14.		0.00
	urance.	tributions and rengious donations	17.	Ψ	0.00
		nsurance deducted from your pay or included in lines 4 or 20.			
	a. Life insur		15a.	\$	0.00
	. Health ins		15a. 15b.	·	0.00
				·	
	. Vehicle in		15c.	·	87.00
		urance. Specify:	15d.	\$	0.00
_	<b>ces.</b> Do not in ecify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
		lease payments:			
17a	<ol> <li>Car paym</li> </ol>	nents for Vehicle 1	17a.	\$	254.00
17b	<ol> <li>Car paym</li> </ol>	nents for Vehicle 2	17b.	\$	0.00
17c	. Other. Sp	pecify:	17c.	\$	0.00
17d	d. Other. Sp	pecify:	17d.	\$	0.00
. You	ur payments	s of alimony, maintenance, and support that you did not report as			
		your pay on line 5, Schedule I, Your Income (Official Form 106l).	18.	\$	0.00
). <b>Oth</b>	ner payment	s you make to support others who do not live with you.		\$	0.00
Spe	ecify:		19.		
. Oth	ner real prop	perty expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
20a	a. Mortgage	s on other property	20a.	\$	0.00
20b	. Real esta	te taxes	20b.	\$	0.00
20c	. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
		nce, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.	·	0.00
	ner: Specify:			+\$	0.00
. Jui	iei. opeciiy.			Ψ	0.00
. Cal	culate your	monthly expenses			
22a	a. Add lines 4	through 21.		\$	2,521.00
22b	. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	,
		2a and 22b. The result is your monthly expenses.		\$	2,521.00
3. Cal	culate your	monthly net income.			
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,527.00
		r monthly expenses from line 22c above.	23b.		2,521.00
		, 1			
23c		your monthly expenses from your monthly income. t is your <i>monthly net income</i> .	23c.	\$	6.00
	ine resul	t is your monuny neumoume.	200.		
For	example, do y	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your eterms of your mortgage?			or decrease because of a
		Explain here:			
ш,	Yes.	<u>Ελριαίτι τίσισ.</u>			

In re	Deanna Jean Ternes		Case No.	
		Debtor(s)		

# SCHEDULE J - YOUR EXPENSES Attachment A

Amounts listed for rent and utilities are estimated. Debtor expects to be obtaining her own housing in the near future. Debtor is currently residing with parents

Debtor 1  Debtor 2 (Spouse if, filing)	ation to identify your  Deanna Jean Ter  First Name						
Debtor 2							
		nes Middle Name	l ast	t Name			
(Spouse if, filing)		Middle Name	Last	Name			
	First Name	Middle Name	Last	t Name			
United States Ban	kruptcy Court for the:	DISTRICT OF OREGON					
Case number							
(if known)						_	Check if this is an amended filing
Official Form	106Dec						
Declarati	on About a	n Individual De	ebto	or's Sche	dules		12/15
two married ped	ple are filing togethe	r, both are equally responsibl	e for si	applying correct in	formation.		
		le bankruptcy schedules or a					
		n connection with a bankrupt	cy case	ecan result in fines	s up to \$250,0	00, or impris	sonment for up to 20
ears, or both. 16	U.S.C. §§ 152, 1341, 1	1519, and 3571.					
Sign	Below						
Did you pay	or agree to pay some	one who is NOT an attorney t	to help	you fill out bankru	ptcy forms?		
■ No							
☐ Yes. Na	ame of person				Attach Bar	nkruptcv Petit	ion Preparer's Notice,
_							ure (Official Form 119)
		discillation and disconnections	, and c	alica de la aceleta de la colonia			
	y of perjury, I declare true and correct.	that I have read the summary	anu si	cnedules filed with	this declarati	on and	
that they are		that I have read the summary	X	cnedules filed with	this declarati	on and	
that they are	true and correct.	that I have read the summary		Signature of Debtor		on and	
that they are  X /s/ Dean  Deanna	true and correct. na Jean Ternes	that I have read the summary				on and	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill	in this inform	nation to identify you	ır case:			
Del	btor 1	Deanna Jean To	ernes Middle Name	Leaf Name		
De	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bar	nkruptcy Court for the	DISTRICT OF OREGO	N		
	se number					Check if this is an amended filing
	ficial For		Affairs for Indiv	iduals Filing for E	Rankruntev	4/16
Be a	as complete a	and accurate as poss	sible. If two married people, attach a separate sheet	e are filing together, both are to this form. On the top of an	e equally responsible for so	upplying correct
Pai	rt 1: Give D	etails About Your M	arital Status and Where Y	ou Lived Before		
1.	What is your	current marital stat	us?			
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	ı lived anywhere other tha	n where you live now?		
	□ No					
	_	t all of the places you	lived in the last 3 years. Do	not include where you live now	<b>N</b> .	
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1 Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	2638 SE M Portland, 0		From-To: 1/14-12/15	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	3702 SE C Portland, 0	esar Chavez OR 97202	From-To: <b>3/16-10/16</b>	☐ Same as Debtor	1	Same as Debtor 1 From-To:
3. stat				egal equivalent in a commu Nevada, New Mexico, Puerto R		
	■ No □ Yes. Ma	ke sure you fill out So	chedule H: Your Codebtors	Official Form 106H).		
Pai	rt 2 Explai	n the Sources of Yo	ur Income			
4.	Fill in the tota	al amount of income y	ou received from all jobs an	ting a business during this y d all businesses, including par sive together, list it only once u	t-time activities.	lendar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

#### Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Amount you Dates of payment Total amount Was this payment for ... still owe paid

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Del	otor 1 Deanna Jean Ternes		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this paym	ent for
	Capital One Auto POB 30285 Salt Lake City, UT 84130-0285	\$253.52 on 2/15, 3/15 and 4/15 2017	\$760.56	\$12,697.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repay ☐ Suppliers or ☐ Other	
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any ger a control, or owner of 20% of	neral partners; partne or more of their voting	erships of which you g securities; and ar	u are a general p ny managing agei	artner; corporation nt, including one fo
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider		ments or transfer a	any property on ac	ccount of a debt	that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for thi	
			paid	still owe	Include creditor	's name
	t 4: Identify Legal Actions, Repossession					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No  Yes Fill in the details					
	Yes. Fill in the details.  Case title	Nature of the case	Court or agency		Status of the o	ase
	Case number	Nature of the sace	count on agoing,		Glatao or tillo o	400
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached, s	eized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No  Yes. Fill in the details.	ptcy, did any creditor, inc cause you owed a debt?	luding a bank or fir	nancial institution	, set off any amo	ounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date a	action was	Amount
	Oregon Department of Revenue Attention Bankruptcy Unit 955 Center St NE	offset 2016 tax refur Last 4 digits of account r			h 1, 2017	\$210.00

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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12.	Within 1 year before you filed for bankruptcy, court-appointed receiver, a custodian, or anot	was any of your property in the possession of an her official?	assignee for the bene	fit of creditors, a
	■ No □ Yes			
Par	t 5: List Certain Gifts and Contributions			
13.	■ No  Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	than \$600 per person?	,
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy. ■ No	, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or contribu	ution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	how the loss occurred	ribe any insurance coverage for the loss	Date of your loss	Value of property lost
	Includ	de the amount that insurance has paid. List pending ance claims on line 33 of <i>Schedule A/B: Property.</i>	1000	1001
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	<ul><li>☐ No</li><li>☐ Yes. Fill in the details.</li></ul>			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Brian Wheeler 3939 NE Hancock St Srte 304 Portland, OR 97212 brian@brian-wheeler.com	300 and 912	2/15/2017 and 4/12/17	\$1,212.00
	Debtorcc,Inc 378 Summit Ave Jersey City, NJ 07306 debtorcc.org	Consultant fees	5/12/17	\$14.95

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Deanna Jean Ternes

17.	Within 1 year before you filed for bankruptor promised to help you deal with your credito Do not include any payment or transfer that you	rs or to make payment			or transfer any propo	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread   No  Yes. Fill in the details.	usiness or financial aff ade as security (such as	airs? the granting of a sec			
	Person Who Received Transfer Address  Person's relationship to you	Description and property transfer		Describe any property or payments received or debts paid in exchange		Date transfer was made
	Ricardo Lantigua address unknown	1988 Mazda 23 \$500	2	\$00		10/15/15
	None					
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  No  Yes. Fill in the details.  Name of trust	tection devices.)	value of the proper			Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Stora	ige Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association of the same of the	r other financial accou	nts; certificates of			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was used, sold, oved, or nsferred	Last balance before closing or transfer
	Advantis Credit Union Ron Barrick, Manager CEO 10501 S.E. MAIN STREET Miwaukie, OR 97222	XXXX-	☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other check and savings	:	arch 2017	\$0.00
	Unitus Credit Union 2121 SW 4th Ave Portland, OR 97201	XXXX-0001	☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other check and savings	20	osed April 17	\$0.00

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Deanna Jean Ternes

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?			
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
	Redefyne Moving 5100 SE Harney Ste 9 Portland, OR 97206	Debtor only	household goods	□ No ■ Yes			
Par	9: Identify Property You Hold or Control for	r Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	10: Give Details About Environmental Inform	nation					
For	he purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground	- ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		aw, whether you now own, operate,	or utilize it or used			
	<i>Hazardous material</i> means anything an enviro hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Del	btor 1	Deanna Jean Ternes		Case number (if known)						
26.	Have	e you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements and orders.						
		No								
		Yes. Fill in the details.								
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of the case						
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business							
27.	With	in 4 years before you filed for bankrup	ntcy, did you own a business or have an	y of the following connections to any business?						
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time						
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
	_	No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.								
		iness Name	Describe the nature of the business	Employer Identification number						
	Add	Iress aber, Street, City, State and ZIP Code)		Do not include Social Security number or ITIN.						
	(	, 666, 6, 6 a a a.	Name of accountant or bookkeeper	Dates business existed						
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	tcy, did you give a financial statement (	o anyone about your business? Include all financial						
		No								
		Yes. Fill in the details below.								
	Nan		Date Issued							
		Iress aber, Street, City, State and ZIP Code)								
Pai	rt 12:	Sign Below								
are with 18 U	true a n a ba J.S.C.	ind correct. I understand that making a		d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both.						
		Jean Ternes	Signature of Debtor 2							
Sig	ınatur	e of Debtor 1								
Da	te N	lay 12, 2017	Date							
Did ■ N	No	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 107)?						
Did	you p	pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy forms?						
<b>I</b>	No .									
	es. N	ame of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration	on, and Signature (Official Form 119).						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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